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S.D. OF N.Y.

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

Beverly Diane Antwi **17CV7888**
 AKA Beverly Diane AKOSUA Liberty Martin Antwi
 Write the full name of each plaintiff. CV

(Include case number if one has been assigned)

-against-

COMPLAINT

Do you want a jury trial?

☒ Yes ☐ No

- ① Douglas K. Stern Esquire
 ② Abrams, Fensterman, Fensterman, Eisman
 Formato, Ferrara & Wolf LLP
 ③ Andrew Racine chief medical officer, Department of psychiatry
 Montefiore medical center Wakefield Hospital County of
 ④ Alan Yancovitch M.D. ⑤ Assisted out patient Treatment Bronx
 ⑥ ACT Team Bronx Psych CTR

Write the full name of each defendant. If you need more space, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section II.

- ⑦ psychiatric treatment/
 medication management
 Bronx psychiatric center
 ⑧ Bronx Psychiatric center

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

⑨ NYS
 offices of
 mental
 Health &
 Hygiene

I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal-court jurisdiction in your case?

☒ Federal Question

ALSO Human Rights Violations.

☐ Diversity of Citizenship

A. If you checked Federal Question

Which of your federal constitutional or federal statutory rights have been violated?

There have been several unconstitutional arrests and forced medication management without a legal court order in place. I believe coercion of judges is happening. Is it legal for Supreme Court Justices to be forced to sign Court orders against their will, when they disagree with the petitioner.

B. If you checked Diversity of Citizenship**1. Citizenship of the parties**

Of what State is each party a citizen?

The plaintiff, Beverly Diane Antwi is a citizen of the State of
(Plaintiff's name)

New York / New York

(State in which the person resides and intends to remain.)

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of

Non-Applicable.

If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff.

Both ~~the~~ Individuals
&
corporations

If the defendant is an individual: Eric Broutman
DOUGLAS K. STERN ESQUIRE

The defendant, Andrew Racine
ALAN Yancovitch, is a citizen of the State of
(Defendant's name)

or, if not lawfully admitted for permanent residence in the United States, a citizen or
subject of the foreign state of

If the defendant is a corporation:

ABRAMS, Fensterman, Eisman, formeto, Peera, & Wolf
The defendant, ~~Eric Broutman~~, is incorporated under the laws of Bronx Psychiatric Center

the State of New York State

and has its principal place of business in the State of New York State

or is incorporated under the laws of (foreign state) That would be Illegal

and has its principal place of business in City of New York borough
of the BRONX

If more than one defendant is named in the complaint, attach additional pages providing
information for each additional defendant.

II. PARTIES

A. Plaintiff Information

Provide the following information for each plaintiff named in the complaint. Attach additional
pages if needed.

Beverly .D. Antwi
First Name Middle Initial Last Name

2240 East Tremont Ave. # 7D
Street Address

Bronx New York 10462
County, City State Zip Code

(917) 803-7658
Telephone Number Email Address (if available)

mailing
address

DAD'S
#

B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1: IAN DACOSTA
 First Name Last Name
DIRECTOR ACT TEAM SERVICES BY Psych ctr
 Current Job Title (or other identifying information)
3050 White Plains RD
 Current Work Address (or other address where defendant may be served)
BX NY New York 10467
 County, City State Zip Code

Defendant 2: Dimitri Bronovitski M.D.
 First Name Last Name
3050 White Plains RD BX, New York
 Current Job Title (or other identifying information)
3050 White Plains RD
 Current Work Address (or other address where defendant may be served)
Bronx New York 10467
 County, City State Zip Code

Defendant 3: Bronx Psychiatric Center
 First Name Last Name
 Current Job Title (or other identifying information)
1500 Waters Place
 Current Work Address (or other address where defendant may be served)
Bronx New York 10461
 County, City State Zip Code

Defendant 3: Andrew Racine

Defendant 6: Himani Ghoge
Licence # 264994-1

Defendant 4: Fensterman, Fensterman, Esman, Formato

First Name Ferrara Last Name Wolf, LLP

Counsel to Andrew Racine

Current Job Title (or other identifying information)

1500 Waters Place - Bronx Psychiatric Center

Current Work Address (or other address where defendant may be served)

Bronx New York 10461

County, City

State

Zip Code

III. STATEMENT OF CLAIM

Place(s) of occurrence: New York State Supreme Court

Bronx Psychiatric Center

1500 Waters Place BX, N.Y. 10461

Date(s) of occurrence:

December 21st 2016

FACTS:

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and what each defendant personally did or failed to do that harmed you. Attach additional pages if needed.

I was served with a Bail order
where the signature of the Judge
differed from the Judge's stamp. Now
on the filing and statements of the
petitioner, they had no legal precedence
for an AET Team or AOT to be
instituted. I had only been hospitalized
once and it was voluntary. I also was
not in violation of any OMH laws. I
was residing legally at the Franklin
women shelter, I was receiving meals, I
was in no medical health crisis, I was
suffering from no psychological or delirious
episodes. I complained of stalking, and
was told that I was a negative influence in
NYC because stalking me (which was the
implication) brings money to New York City.
Also, I am being told to live on \$100.00 a month.

INJURIES:

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

Blood Sugar level As low As 24
Pulse and Blood Rate as low as 60/30
where Close To Coding. was given a
Clozari injection that Caused temporary
partial paralysis at Bx Lebanon
Hospital.

IV. RELIEF

State briefly what money damages or other relief you want the court to order.

I want Honorary Ben R. Barreto who
was Coerced given the monetary Value of
the whole self - worth of Bx Psychiatric
Center and AET Team services. And the
Businesses themselves returned to New York
city government AS government run
Hospitals.

V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

10/12/17
 Dated Beverly Do Plaintiff's Signature Antoni
 First Name Middle Initial Last Name
2040 EAST TREMONT AVE
 Street Address
BX NEW YORK 10462
 County, City State Zip Code
(917) 803-8658
 Telephone Number Email Address (if available)

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically:

☐ Yes ☒ No

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.